

**SPENBOROUGH URBAN DISTRICT COUNCIL**

★

# **ANNUAL REPORT**

**OF THE**

**PUBLIC HEALTH SERVICES**

**No. 29**

**For the Year**

**1 9 4 8**

**WILLIAM MASON DOUGLAS, M.B., Ch.B., D.P.H.**

**Medical Officer of Health.**



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## URBAN DISTRICT COUNCIL OF SPENBOROUGH

### Constitution, 1948-49

Chairman : Councillor W. H. COOPER, J.P.

Vice-Chairman : Councillor S. R. ELLIS

Councillor A. A. BAYLEY (resigned December, 1948)	Councillor W. H. PULLAN
„ G. BLACKBURN, J.P., F.T.I.	„ D. E. RIDING
„ E. COCKROFT	„ W. B. SCHOFIELD
„ D. D. FIRTH	„ J. V. SHORROCK
„ J. HALSTEAD	„ H. SIDDLE
„ E. L. HARTLEY	„ A. W. SMITH
„ A. D. HEATON	„ J. SMITH
„ T. KERSWILL	„ W. STILLINGFLEET
„ L. MALLINSON	„ A. R. STOCKHILL
„ D. NAYLOR	„ A. STOTT
„ D. PAGE	„ H. de LACY TAYLOR
„ H. PEARSON	„ W. E. TETLEY, J.P.
„ J. PEARSON	„ H. WILCOCK
	„ F. E. WILDE
	„ H. WRAY

### HEALTH COMMITTEE, 1948-49

Chairman : Councillor W. E. TETLEY, J.P. (to November, 1948)

Vice-Chairman : Councillor E. COCKROFT (to November, 1948)

Chairman : Councillor E. COCKROFT (from November, 1948)

Vice-Chairman : Councillor A. W. SMITH (from November, 1948)

The Chairman of the Council, Councillor W. H. COOPER, J.P.

Councillor D. D. FIRTH	Councillor J. SMITH
„ E. L. HARTLEY	„ H. de LACY TAYLOR
„ L. MALLINSON	„ H. WILCOCK
„ D. PAGE	„ H. WRAY

### MATERNITY AND CHILD WELFARE COMMITTEE

#### 1948 - 1949

Chairman : Councillor E. COCKROFT

Vice-Chairman : Councillor E. L. HARTLEY

The Chairman of the Council : Councillor W. H. COOPER, J.P.

Councillor D. D. FIRTH	Councillor H. de LACY TAYLOR
„ L. MALLINSON	„ W. E. TETLEY
„ D. PAGE	„ H. WILCOCK
„ A. W. SMITH	„ H. WRAY
„ J. SMITH	

Co-opted Members :

Mrs. M. M. WADDINGTON

Dr. W. CHALMERS

Dr. E. W. N. WOOLER

N.B.—The Functions of the Committee ceased on the 5th July, 1948.

## **REPRESENTATION ON JOINT HOSPITAL BOARDS**

### **Liversedge and Mirfield Joint Hospital Board**

Councillors BLACKBURN, HARTLEY, HEATON, NAYLOR and TETLEY.

### **North Bierley Joint Hospital Board**

THE CHAIRMAN OF THE COUNCIL, Councillors BAYLEY, PAGE and PULLAN

### **Oakwell Joint Hospital Board**

THE CHAIRMAN OF THE COUNCIL,  
Councillor STILLINGFLEET



October, 1949.

TO THE CHAIRMAN AND MEMBERS OF THE PUBLIC HEALTH  
COMMITTEE, SPENBOROUGH URBAN DISTRICT COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to submit to you the Annual Report relating to the Urban District of Spenborough and the work of the Health Department for the year 1948.

**Page**  
**12** **Preface**

The National Health Service Act which came into operation on the 5th July releases the Spenborough Council from many of the tasks which it has willingly undertaken in the past in connection with the Preventive Medical Services, and the opportunity is therefore taken of sketching very briefly the development of these services in Spenborough over the past twenty years. This will perhaps be of interest to local residents, and to those who have played their part in bringing them into being. This development is sketched in the preface to this report.

**Pages**  
**14, 18** **Vital Statistics.**

The vital statistics of 1948 provide a striking example of the adaptability of the human race to its environment and of its powers to survive. Thus, in spite of our filthy atmosphere, our high proportion of bad houses, our overcrowding, our unsolved problem of tuberculosis, our dietary insufficiencies, our unclean food, our neglect of the aged, and the existing gaps in the knowledge of prevention and cure of many diseases, only 463 people died during the year, and of these, over a half occurred in the age group 65 and over, mainly from the so-called diseases of degeneration, i.e., heart disease, cancer, and diseases of the circulatory system. The death-rate of 12.6 is higher than that for towns of similar size throughout England and Wales but is not standardised for age. The biggest increase in the cause of death has been in regard to cancer with 19 cases more than in 1947. These figures do not show, of course, the vast amount of avoidable sickness and distress caused by the factors mentioned above. The birth-rate fell to 17.6 and is also below the average for towns of similar size. The Infant Mortality Rate shows a substantial increase over last year, being 40.5 as against 30.4. This was somewhat to be expected, with a falling birth-rate succeeding an abnormally high one in the preceding year, and, is at a disadvantage compared with the return for England and Wales, which is related to the births. The children under one year of age who died in 1948 were not necessarily born in that year. Actually there were four more infant deaths in 1948 than in 1947, and I do not regard this as in any way significant. The main causes of infant deaths are premature birth and congenital malformations, which account for 15 cases. There were no deaths among illegitimate infants under one year. The stillbirth-rate, although lower than last year, is still depressingly high.

**Pages**  
**22, 24** **Infectious Diseases.**

Once again measles, whooping cough and chicken pox were by far the most prevalent of the infectious diseases and account for 838 of 985 cases notified. There was one death from measles and one from whooping cough, both in infants under one year of age. There were no notifications of "major" infectious disease other than five cases of diphtheria, all of which were comparatively mild, and three of which occurred in adults. Only one case had received immunisation, and that two years previously.

**Page 25**     **Diphtheria Immunisation.**

Our main efforts towards securing a high percentage of immunised children has once again been concentrated on the personal approach to the parents, with a check point at the first year of attendance at school. This had good results and 814 children have been immunised during the year. I now estimate that 51 per cent. of children age 1—5 years and 76 per cent of children 5—15 years are protected against diphtheria. These figures are compiled from our own returns of births and immunisation.

**Page 26**     **Tuberculosis.**

Another problem which does not seem capable of early solution is shortage of hospital beds for cases of tuberculosis. It is a matter of great distress to myself and to the Tuberculosis Officers to see cases which would undoubtedly benefit by early hospitalisation having to wait many months before they can hope to be admitted, and in the meantime are a source of danger to all who come into contact with them.

**Pages 27-28**     **Maternity.**

The Ante-Natal Clinics continue to be well attended with the result that 64 per cent of the expectant mothers received their ante-natal care, either wholly or in part, through our clinics. The effect of the National Health Service Act has scarcely yet been felt by the clinics, but it seems certain that this percentage will drop, and that some of the expectant mothers will seek their ante-natal care through their own general practitioner. There appears to be neither advantage nor disadvantage in this unless the practitioner proposes to conduct the confinement personally when continuity of medical care would be achieved. Samples of blood of all women attending the ante-natal clinics are examined for anæmia, rhesus factor and syphilis as a routine measure.

Approximately 52 per cent. of all confinements took place in maternity homes or other institutions, as against 32 per cent. in the previous year. It is to be expected that the number wishing to have their confinements in maternity homes will increase under modern conditions, and it therefore becomes necessary to point the need for a new maternity home, properly equipped and capable of dealing with every emergency, within this area. After all, maternity accommodation is one aspect at least of the hospital services which should be decentralised, and while Crossley Maternity Home is serving a very useful function it was brought into being largely as an expedient to provide better conditions for normal confinements than are commonly present in the houses of the area. A number of expectant mothers were unable to obtain maternity accommodation because their home circumstances appeared to be adequate to their needs, and because of the shortage of beds for normal maternity cases.

**Page 19**     Of 27 premature births recorded during the year only five of these were born at home, and in those cases which survived, the midwives continued to attend until the infant weight and development reached a satisfactory level. Special equipment for the nursing of these infants in their own homes is available through the Health Department.



**Page 31 Home Nursing.**

To me, one of the pleasant features of the National Health Service Act has been to bring the Home Nursing Service within the compass of the Health Department. The nurses concerned have passed to the employment of the County Council and are administered through my office. This has brought no difficulties at all, and I have at all times found the nurses to be most willing and co-operative. It is undoubtedly an advantage that Home Nursing has become part of the Public Health and Preventive Services; much can be achieved through co-operation with other sections which did not exist previously.

**Page 29 Child Welfare.**

Attendances at our Infant Welfare Centres throughout the year have been very high. This is very pleasing and would seem to show that the attention and the advice available at these centres is highly appreciated. On the other hand, it is my personal feeling that if an adequate and regular routine of home visiting can be achieved by our Health Visitors, it should seldom be necessary for mothers to bring infants in their first months of life to the Welfare Clinics. The place for advice and instruction to be given is in the home. It then becomes much more personal, and can be adapted to the environment and the personal likes and dislikes of the mother. Our aim for the future will be to secure that each child is visited in its home at least once each week for the first three months of life, fortnightly for the second three months, and monthly thereafter until one year. During this period the Health Visitor can get over to the mother in a personal way the basic principles of infant care and the upbringing of children. There would be a further advantage in this system in that a very complete record of the diseases of early infancy could be obtained, and this would be of particular value for such ailments as gastro-enteritis, which is not a notifiable disease and which one feels could not satisfactorily be made notifiable, but which nevertheless takes its toll of infant life. These visits can, of course, be supplemented by attendances at the clinic, particularly between the ages of one year and entry to school, during which time it is increasingly obvious that advice is required by many on such subjects as footwear, clothing, diet, immunisation against disease, enuresis, physical and mental defects, and the future education of the child. Personally, too, I should like to see the discontinuance of the sale of baby foods at all clinics so that the main emphasis would once again revert to the educative and medical aspect. The time has surely come when the sale of these foods can revert to the normal commercial channels, and if their cost is too great it should not be a difficult matter to adjust, either by control or subsidy.

**Birth Control**

There appears to be no policy at all with regard to family planning or birth control. I feel certain that the establishment of a proper Birth Control Clinic in the area would be very greatly appreciated by many people, and would do a great deal of good, not only in removing an element of fear of unplanned families which exist in many marriages, but in removing the physical and psychological disturbances of ignorance of birth control methods. This knowledge should be available to all, whether married or not, for while no one would wish to encourage illicit intercourse it will always exist on a very considerable scale, and the tragedy of the unwanted child is so great both from the child's point of view and that of the unmarried mother that it would well repay us to make readily available the means of avoiding this.

## Day Nursery

The Day Nursery at Moorend continues to work to capacity, and has a waiting list of approximately 60. Admissions are arranged on the basis that those whose need is greatest receive priority. There were no cases of outstanding hardship on the waiting list at the end of the year. Except where the need is inescapable it is quite wrong that very young children should be separated from the care of their mothers during the greater part of the day, and I feel that the present-day nursery accommodation is sufficient to meet the socio-medical needs of the district. Whether there is a case for the provision of further nursery schools I do not propose to discuss in this report.

## Page 31 Problem Families.

The supervision of Problem Families has continued unremittingly, in odd cases not without success, and I have to record my appreciation of the good work done by the National Society for the Prevention of Cruelty to Children, which has co-operated most fully with my department. This work constitutes one of the least pleasant of the very many tasks of the modern health visitor, and one which is, on comparatively few occasions, rewarded with substantial achievement. If, as I believe, the main cause of problem families is due to defective intellect plus defective character, this is not surprising, and I wish to record my admiration of the manner in which the health visitors have stuck to their uncongenial task.

## Domestic Help.

Page 31

The Home Help Scheme was little sought after until the transference of this scheme to the County Council. Because of the widening scope of its activities, and particularly because of the extremely generous scale of recovery of charges, the latter half of the year showed that this service was one which was likely to expand enormously. This may be a good thing but I hope it will not tend to make people regard lightly their moral responsibilities for looking after their own kith and kin.

## School Medical Services.

Pages 32-35

A brief section in connection with school medical work is included to give some indication of the health of the school children of the area, and the medical services available. The main factors are the large number of children which it was found possible to examine with the increased medical assistance available, and the eyesight of every child attending school was tested, both at school, and if thought necessary, by the consultant ophthalmologist employed for this work. Out of 242 cases referred to the ophthalmologist, glasses were prescribed in 191 cases.

The work of ascertainment in connection with physically and mentally handicapped children proceeded increasingly, and much yet remains to be done. The position with regard to educationally subnormal children is, of course, quite fantastic. There is little or no hope of them being admitted either to special schools or to special classes, and they therefore continue to attend their ordinary schools, being moved up a class each year according to age and falling further and further behind. There is no doubt at all that this is bad for them psychologically, and must in many cases hinder the work of the class.



There is great need for a Child Guidance Clinic to be readily available. At the present moment we are able to secure occasionally an appointment at the Child Guidance Clinic at Barnsley. Being remote, however, this is liable to lead to broken appointments, and tends to make us reserve only the worst cases for such an investigation, the result being that by the time that the child is seen at the Clinic the maladjustment may have progressed so far that either improvement is hopeless, or the job made very much harder.

The services of a physiotherapist became available to the Division in September of this year, and this gives an opportunity for the children of the area to receive locally remedial treatment for orthopædic defects, chronic bronchitis, asthma and the like. Although no figures are available it is my impression that a high proportion of the school children in this district suffer from recurrent bronchitis or from asthma.

Largely in the nature of an experiment, permission was given to me for the employment of a chiropodist in connection with the School Health Service, on a sessional basis of two half-days per week. It was quickly evident that I had underestimated the demand and the need for this service, as a glance at the figures in the body of the report will show. Cases were referred to the chiropodist by the School Medical Officers mainly from the routine school medical inspections, and it appears that approximately 11 per cent. of all children inspected at school were in need of remedial treatment for their feet. Chiropody is a true preventive service, educative as well as remedial, and it should be our aim to enable people to stand on their own feet physically as well as metaphorically. Almost without exception the mothers of these children have expressed the wish that this service had been available to them in earlier years, and I trust that it will be found possible in the future to expand this service considerably.

Unfortunately it has not yet been found possible to obtain the services of a Speech Therapist with the result that children who would benefit, perhaps very greatly, by this treatment, remain untreated.

**Page**    **Environmental Hygiene.**  
**44**

During the year there were 263 ash pit conversions and this scheme may now be regarded as completed. The next thing which will be required to be tackled is the conversion of privies to water closets wherever possible. There are approximately 526 privy midden compartments in use, and of these it is estimated that approximately 361 will be capable of conversion.

**Pages**    **Milk Supplies.**  
**36, 37**

Once again the routine visiting and sampling of all milk premises in the area has been carefully carried out, but I look forward to the achievement by 1954 of milk supplies which are either tuberculin tested, attested or pasteurised. This will represent a tremendous advance in eradicating much of the disease and misery which is caused by impure milk, particularly that which is infected with bovine tuberculosis.

**Page 39 Food Hygiene.**

Our policy in regard to the supervision of food cleanliness and the proper handling of foodstuffs has again been that of the personal approach. All food premises are visited periodically by the Sanitary Inspectors, and advice is given where it appears to be necessary. It is my opinion that an adequate and capable staff of Inspectors is the best answer to this problem, and I feel that much expenditure of time and money can take place in connection with propaganda and "stunts" to little purpose.

**Page 39 Water.**

With the exception of five houses the whole of the Spenborough area is supplied by mains water which is pure and of good organic quality. There is one well in the district, and this is kept under constant supervision.

**Page 42 Housing.**

During the year 218 new houses were erected but the standard of housing in the area will be for a long time yet, much lower than it ought to be, and a great amount of work in connection with inspection and remedying of existing defects will continue to be required. It is estimated, approximately, that 1,200 existing houses are sub-standard and the need for a proper housing survey is very evident. It is all very well to say that we are building as many houses as we are able to and that we should continue to build to the limit for years yet, but I think it would be a benefit to all to know exactly what we have to aim at to achieve a satisfactory sanitary district. Such a survey should be carried out nationally in order to avoid reduplication of work. It would appear that a long time will elapse before a progressive slum clearance policy becomes possible. It is also evident that there is a great deal of over-crowding of all degree likely to exist for many years, and here again the survey is necessary.

**Page 45 Smoke Abatement.**

It seems that there is no likelihood whatever of this problem being effectively tackled in the foreseeable future. In the meantime, all that can be done is by accumulation of evidence of the distressing effect of atmospheric pollution, and dealing as best as one can under existing legislation with the worst offenders. The weapon of public opinion would seem to be our biggest hope for the future.

**Conclusion**

I wish once again to thank the Chairman and members of the Health and Maternity and Child Welfare Committees for their continued support and encouragement throughout the year. Your Committee, like others in the past, has endeavoured, not without success, to provide a good preventive medical service in so far as lay within its power and in so far as seemed essential, for the least financial expenditure, and I have not, during my term, found you unwilling to spend if the subject has been regarded as essential for the welfare of your ratepayers. The responsibility for most of these services has now passed to the County Council, and with the conception of preventive medicine and of social medicine expressed in the National Health Service Act, scope is provided for great expansion. It is my hope that the expansion will take place only in what is essential, and that



good value will be given for the money which will be expended. After all, one of the greatest social services is that people should have the education, and not least, the money, in their own pockets to fend for themselves. Personally I very much regret that the means have not yet been found to enable local committees to play their part in the administration of these services as they affect their own area.

I wish to thank Mr. Templeman, the Chief Sanitary Inspector, for the report he has made to me of the sanitary circumstances of the area, and all members of the staff for their loyal and willing work in a trying year. I greatly admire the spirit in which they have co-operated with each other, and in which they have accepted new ideas, new methods, and in some cases, new masters.

I am, Mr. Chairman, ladies and gentlemen,

Your obedient servant,

W. M. DOUGLAS,

Medical Officer of Health and Divisional Medical Officer.

## PREFACE

### THE HEALTH SERVICES OF SPENBOROUGH FROM 1920

In 1916 the Urban District of Spenborough was formed by the amalgamation of Cleckheaton, Liversedge and Gomersal, each of which districts had a part-time Medical Officer of Health until 1920, when a whole-time Medical Officer of Health was appointed to the combined districts. By the end of that year (1920) the staff of the Health Department consisted of one whole-time Medical Officer of Health, three part-time Health Visitors and School Nurses, a Chief Sanitary Inspector and an Assistant Sanitary Inspector.

At that time there were no Infant Welfare or Ante-natal Clinics, but the Health Committee gave permission for the free issue of Glaxo to necessitous cases.

In 1920 also Spenborough became an autonomous education authority under part III of the 1902 Education Act, and became responsible for the medical inspection and treatment of the children attending schools in the district. No routine medical inspection at schools had been carried out subsequent to the outbreak of war in August, 1914. In 1920 a scheme for the routine medical examination, and for cleanliness inspections were instituted and schemes for the treatment of enlarged tonsils and adenoids, dental defects and ringworm of the scalp were proposed.

In 1921 it had still not been possible to open any clinics, but 1,195 lbs. of Glaxo were distributed free of charge, and 2,716 at cost price, and in several of the schools meals were provided at a cost of 6d. each. These measures were instituted to help counter the adverse effects of economic depression upon the children of the area. It is noteworthy that in this year the Board of Education refused sanction for the appointment of a School Dentist or for the installation of equipment for the treatment of ringworm by X-rays. There being no Clinic to which children could be referred, a system for the treatment of minor ailments at schools by School Nurses was instituted.

In 1922 the present premises at Valley Road were opened and served as Headquarters of the Health Department and also as the first of the Baby Clinics in the area. This year 2,913 lbs. of Glaxo were distributed free of cost and 7,943 lbs. at cost price. There were 1,233 attendances at the new Infant Welfare Clinic during the year.

In 1923 the Infant Welfare Clinic at Scholes was opened and a Voluntary Committee formed. The Board of Education continued to refuse sanction for the installation of X-ray for the treatment of ringworm, but permitted the appointment of a School Dentist to devote two-fifths of his time to Spenborough and three-fifths to Batley. In 1924 a School Dentist was appointed and a fourth Health Visitor and School Nurse was also added to the staff.

In 1925 the first Ante-Natal Clinic was opened and 18 expectant mothers made 20 attendances (total in seven months). In 1926 the Gomersal Nursing Association was formed; 2,679 lbs. of dried milk were distributed free (economic depression during coal strike). The Liversedge Abattoir was opened during this year.

In 1927 a Consultant Ophthalmic Surgeon was appointed to carry out refraction in children with defective vision. One-tenth of the expectant mothers of the area were now attending the Ante-Natal Clinic.

In 1931 the Child Welfare Clinic was started at Cleckheaton.



In 1937 the districts of Birkenshaw, Hunsworth and Hartshead were amalgamated in the Spenborough Urban District, raising the population to 36,029 and the area to 8,160 acres. The fifth Health Visitor and School Nurse was appointed and a third Assistant Sanitary Inspector. The Midwives Act of 1936 was implemented, five midwives employed by the West Riding County Council carrying out their duties in the Spenborough area. The powers of administration were delegated to the Spenborough Council and Maternity and Child Welfare Clinics at Birkenshaw and Roberttown were also brought under the administration of the Spenborough Council. In this year a Home Help Scheme for expectant mothers was started and a full-time dentist was appointed.

In 1939 the present premises at Elm Bank were taken over and Ante-natal, School, Infant Welfare and Dental Clinics commenced. In 1940 the first full-time Deputy Medical Officer of Health was appointed and in 1941 a Child Welfare Clinic was opened at Gomersal. In this year a Consultant Obstetrician and Gynaecologist was appointed.

In 1942 Tenlands Nursery was opened.

In 1943 the Moorend Day Nursery was opened.

Also the administration of the Ambulance Service came under the Health Department for the first time. A 24 hour service was maintained, employing three ambulances and three drivers.

**Attendances at the Council's Child Welfare Centres**

Year	Total Annual Attendances	Year	Total Annual Attendances
1925	1848	1940	4300
1930	2020	1945	7801
1935	2556	1948	9686

**Attendances and number of individual expectant mothers attending at the Council's Ante-natal Clinics**

Year	Attendances	Mothers	Year	Attendances	Mothers
1925	20	18	1940	787	309
1930	436	155	1945	1009	368
1935	500	126	1948	2241	429

**Infant and Maternal Mortality Tables**

Death rates per 1,000 live and stillbirths for the year 1920 and for each succeeding quinquennium, and for the year 1948.

INFANT MORTALITY			MATERNAL MORTALITY		
		England and Wales			England and Wales
Year	Spenborough		Year	Spenborough	
1920	82.8	80.0	1920	8.1	*
1925	88.5	76.0	1925	10.8	3.9
1930	60.9	63.6	1930	3.6	*
1935	54.5	62.6	1935	4.0	4.1
1940	60.0	55.0	1940	4.3	2.97
1945	44.0	50.0	1945	1.1	... 2.05
1948	40.5	34.0	1948	1.5	1.02

\* Not available.

STATISTICS AND SOCIAL CONDITIONS OF THE AREA

Area (in acres) ... ..	8,253
Population (census 1931: 30,963) Registrar General's estimate to mid 1948 ... ..	36,640
Average number of persons to acre ... ..	4.4
No. of inhabited houses to end of 1948 ... ..	12,328
Average No. of persons per house ... ..	3
Rateable Value at 1st April, 1948 (estimate) ... ..	£171,500
Product of Penny Rate (estimate) ... ..	£660

Population

The population of the original Urban District of Spenborough at the 1931 census was 30,963 and the population of Birkenshaw, Hunsworth and Hartshead which were added to the original Urban District in 1937 was 5,066, giving a total population at that time of 36,029. The Registrar-General's estimate of the population of the enlarged Urban District of Spenborough for the middle of 1948 is 36,640, and this figure is used throughout this Report in calculating rates.

EXTRACTS FROM VITAL STATISTICS FOR THE YEAR 1948

Live Births

	Males	Females	Total
Legitimate ... ..	315	300	615
Illegitimate ... ..	20	11	31
Total	335	311	646

Birth-rate per 1,000 estimated population: 17.63.

Stillbirths

	Males	Females	Total
Legitimate ... ..	10	7	17
Illegitimate ... ..	2	—	2
Total	12	7	19

Stillbirth-rate per 1,000 total live and stillbirths 28.58.

	Males	Females	Total
Deaths ... ..	228	235	463

Death-rate per 1,000 estimated population 12.6.

Deaths from Puerperal Causes 1.

Rate per 1,000 total live and stillbirths 1.5.

Deaths of Infants under 1 year:—

	Males	Females	Total
Legitimate ... ..	15	12	27
Illegitimate ... ..	—	—	—
Total	15	12	27



Death-rate per 1,000 live birth 40.5

Death-rate of legitimate infants per 1,000 legitimate live births 43.9.

There were 646 live births during the year which is 110 less than in 1947 and the same as in 1946 ; the birth-rate at 17.63 has consequently decreased from the record figure of last year and is lower than the average for England and Wales (17.9).

The stillbirth-rate of 28.6 per 1,000 live and stillbirths shows a decrease of 4.6 per 1,000 over the previous year. Seventeen of the stillbirths occurred in legitimate pregnancies and two in illegitimate pregnancies.

### BIRTHS REGISTERED IN THE DISTRICT, 1948

Ward	Males	Females	Total
Cleckheaton—East ... ..	12	16	28
Cleckheaton—West ... ..	9	10	19
Hightown and Hartshead ... ..	16	16	32
Birkenshaw ... ..	13	15	28
Gomersal ... ..	29	26	55
Millbridge ... ..	13	10	23
Scholes ... ..	9	9	18
Spen and Littleton ... ..	19	19	38
Oakenshaw and Hunsworth ... ..	14	10	24
Roberttown and Norristhorpe ... ..	21	15	36
Totals	155	146	301

### Deaths

The number of deaths registered in the district in 1948 was 322. From this must be deducted four deaths of persons resident outside the district who died within its boundaries, and to them must be added 145 deaths of residents who died elsewhere. This gives the number of net deaths as 463, equal to a rate of 12.6 per 1,000 estimated population, compared with 12.4 in 1947. The death-rate is higher than that for England and Wales (10.8) and that for districts with a similar population throughout the country (10.7). Over a quarter of the deaths were caused by heart disease (123), and other chief causes were Cancer (86), and Intra-Cranial Vascular Lesions (68).

Of the 27 instances of death within the first year of life occurring in 1948, the most frequent causes were prematurity (nine cases) pneumonia (four cases) and gastro-enteritis (three cases). The death-rate of infants under one year of age per 1,000 live births is 40.5 (30.4 in 1947) which is higher than that for England and Wales (34).

**Birth Rates, Death Rates, Analysis of Mortality, Maternal  
Death Rate and Case Rate of Certain Infectious Diseases  
in 1948 compared with other areas.**

	England and Wales	126 County Borough and Great Towns including London	148 Smaller Towns (Resident Pop. 25,000 to 50,000 at 1931 Census)	London Admin. County	Spen- borough
<b>Births</b>	Rates per 1,000 Civilian Population				
Live Births ....	17.9 (a)	20.0	19.2	20.1	17.6
Still Births ....	0.42(b)	0.52	0.43	0.39	0.52
<b>Deaths</b>					
All causes ....	10.8(a)	11.6	10.7	11.6	12.6
Typhoid and Para Typhoid ....	0.00	0.00	0.00	0.00	0.00
Whooping Cough ....	0.02	0.02	0.02	0.01	0.02
Diphtheria....	0.00	0.00	0.00	0.01	0.00
Tuberculosis ....	0.51	0.59	0.46	0.63	0.24
Influenza ....	0.03	0.03	0.04	0.02	0.00
Small Pox ....	—	—	—	—	—
Acute Poliomyelitis & Polioencephalitis....	0.01	0.01	0.01	0.00	0.00
Pneumonia ....	0.41	0.38	0.36	0.54	0.24
<b>Notifications (corrected)</b>					
Typhoid Fever ....	0.01	0.00	0.01	0.00	0.00
Paratyphoid Fever ....	0.01	0.01	0.01	0.01	0.00
Cerebro Spinal Fever	0.03	0.03	0.02	0.03	0.00
Scarlet Fever ....	1.73	1.90	1.82	1.37	1.85
Whooping Cough ....	3.42	3.51	3.31	3.13	3.93
Diphtheria....	0.08	0.10	0.09	0.10	0.14
Erysipelas ....	0.21	0.23	0.21	0.22	0.16
Small Pox ....	—	—	—	—	—
Measles ....	9.34	9.75	8.84	9.17	14.1
Pneumonia ....	0.73	0.84	0.60	0.57	0.92
Acute Poliomyelitis....	0.04	0.05	0.04	0.04	0.00
Acute Polioencep'itis.	0.00	0.00	0.00	0.00	0.00
<b>Deaths</b>	Rates per 1,000 Live Births				
All causes under 1 year of age ....	34(b)	39	32	31	40.5
Enteritis & Diarrhoea under 2 years of age..	3.3	4.5	2.1	2.4	4.6
<b>Notifications (corrected)..</b>	Rates per 1000 (Live and Still) Births				
Puerperal Fever and Pyrexia ....	6.89	8.90	4.71	7.34(c)	1.5
<b>Maternal Mortality in England and Wales</b>					
	Rates per 1000 Total (Live and Still) Births		Rates per million Women aged 15-44		
140 Abortion with Sepsis ....	0.11		9		0.00
141 Abortion without Sepsis.	0.05		4		0.00
147 Puerperal Infections ....	0.13				0.00
142-146, 148-150 Other Maternal causes ....	0.73				1.5

(a) Rates per 1,000 total population.

(b) Per 1,000 related births

(c) In London Puerperal Fever alone was 0.61

# CAUSES OF AND AGES AT DEATH DURING THE YEAR 1948

Causes of Death	All Ages	Under 1 year	1 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 years and over	Males	Females	Deaths in Institutions
Whooping Cough ....	1	1							1		
Respiratory Tuberculosis ....	9		1		1	4	3		5	4	5
Syphilitic Disease ....	2						2		2		1
Measles ....	1	1							1		
Cancer ....	86					7	35	44	43	43	25
Diabetes ....	4						2	2	1	3	1
Intra Cranial Vascular Lesions..	68				1	1	12	54	29	39	14
Heart Disease ....	123				1		23	99	62	61	24
Other Diseases of Circ. System..	12						7	5	6	6	5
Bronchitis ....	29						11	18	18	11	8
Pneumonia ....	9	4					1	4	4	5	6
Other Respiratory Diseases ....	6							6	4	2	
Ulcer of stomach or duodenum..	3						3		3		3
Diarrhoea under 2 years ....	3	3							1	2	2
Appendicitis ....	1				1					1	1
Other Digestive Disease ....	9						5	4	6	3	8
Nephritis ....	17					1	2	14	3	14	5
Other Maternal Causes ....	1					1				1	1
Premature Birth ....	9	9							2	7	8
Congenital Mal. Birth Injury :											
Infant Diseases ....	11	9	1			1			8	3	7
Suicide ....	8					2	3	3	5	3	1
Road Traffic Accident....	8		2			2	3	1	5	3	4
Other Violent Causes....	5							5	1	4	4
All Other Causes ....	38		1	1			4	32	18	20	1
TOTAL—All Causes ....	463	27	5	1	4	19	116	291	228	235	134







## PREMATURE INFANTS

- (i) The number of premature babies notified during the year whose mothers are normally resident in the Council's area: 27.
- (ii) The total number of premature babies notified during the year who were born :—
- (a) at home ... .. 5
- (b) in hospital or nursing home ... .. 22
- (iii) The number of those born at home :—
- (a) who were nursed entirely at home ... .. 4
- (b) who died during the first 24 hours ... .. 2
- (c) who survived at the end of one month ... .. 3
- (iv) The number of those born in hospital or nursing home :—
- (a) who died during the first 24 hours. ... .. 2
- (b) who survived at the end of one month ... .. 17

TABLE SHOWING BIRTH WEIGHTS OF PREMATURE INFANTS  
Domiciliary Confinements

Birth Weight lbs.      ozs.	No. of Infants	No. of Infants who survived		
		24 hours	2—7 days	1 month
2      8	2	—	—	—
5      —	1	1	1	1
5      4	1	1	1	1
5      8	1	1	1	1
Totals	5	3	3	3

## Institutional Confinements

Birth Weight lbs.      ozs.	No. of Infants	No. of Infants who survived		
		24 hours	2-7 days	1 month
2      5	1			
2      10	1			
4      —	3	3	2	2
4      4	1	1	1	1
4      8	3	3	3	3
4      11	1	1	1	1
4      14	2	2	2	1
5      3	2	2	2	2
5      4	4	4	4	4
5      8	3	3	3	3
5      10	1	1	1	
Totals	22	20	19	17

# VITAL STATISTICS OF THE SPENBOROUGH URBAN DISTRICT FOR 1941-48

YEAR	Population estimated to middle of each year	Births		Total Deaths registered in the District		Transferable Deaths of residents not registered in the District	Transferable Deaths of non-residents registered in the District	Net Deaths belonging to the District			
		Number	Rate	Number	Rate			Under 1 year		At all ages	Rate
								Number	Rate per 1000 births	Number	
1941	35810	496	13.8	329	9.2	5	155	19	38.3	479	13.3
1942	34960	503	14.4	287	8.2	8	168	27	53.7	447	12.8
1943	34090	472	13.8	311	9.1	11	155	16	33.9	455	13.3
1944	34040	585	17.2	329	9.5	6	143	28	47.9	466	13.7
1945	33780	471	13.9	312	9.2	8	124	22	46.7	428	12.7
1946	35400	646	18.2	348	9.8	12	184	35	54.2	520	14.7
1947	35930	756	21.04	298	8.3	5	154	23	30.4	447	12.4
1948	36640	646	17.6	322	8.8	4	145	27	28.6	463	12.6

Area of District in Acres (Land and Inland Water)

8253

Total Population at all ages (Census 1931)

30963

Estimated Population by Registrar General (Mid 1948)

36640

Number of Inhabited Houses

12328

# INFANTILE AND MATERNAL MORTALITY RATES OF SPENBOROUGH FOR THE PAST 20 YEARS

Year	Births	Infant Deaths	Maternal Deaths	Infant Mortality Rate	Maternal Mortality Rate
1929	442	35	2	79	4.5
1930	413	18	Nil	44	—
1931	396	31	2	78	4.9
1932	379	27	1	71	2.5
1933	396	15	2	38	4.9
1934	338	16	Nil	47	—
1935	378	15	3	39	7.9
1936	374	26	Nil	70	—
1937	400	38	5	93	12.2
1938	462	30	Nil	66	—
1939	484	18	Nil	37	—
1940	495	20	5	40.4	9.6
1941	496	19	2	38.3	3.8
1942	503	27	Nil	53.7	—
1943	472	16	2	33.9	4.0
1944	585	28	Nil	47.9	—
1945	471	22	1	46.7	2.1
1946	646	35	Nil	54.2	—
1947	756	23	—	30.4	—
1948	646	27	1	40.5	1.5

**CASES OF INFECTIOUS DISEASE occurring in Spenborough Urban District**  
classified according to Age Groups and Wards, 1948

Disease	All Ages	Under 1 year	1 to 5 years	5 to 15 years	15 to 25 years	25 to 45 years	45 to 65 years	Over 65 years	Ages Unknown	Oakenshaw and Hunsworth	Scholes	Cleckheaton East	Cleckheaton West	Spen and Littleton	Millbridge	Hightown and Hartshead	Roberttown and Norristhorpe	Gomersal	Birkenshaw	Removed to Hospital
Scarlet Fever	68			49	1	2				8	3	1	6	7	11	3	10	16	3	62
Diphtheria	5		16		1	2								1	1		1	2	1	5
Pneumonia	34	2	2	4	1	5	9	3		4	6	5	2	3	2	5		6	4	
Chicken Pox	175	10	82	80	3					6	27	14	24	16	15	44	11	14	18	
Measles	519	31	325	161		2				75	29	67	102	42	22	74	26	64	2	
Whooping Cough	144	18	103	21		2	2	2		11	20	13	26	18	8	15	16	15		
Erysipelas	6					2	2					2	2		1		1			
Puerperal Pyrexia	1				2	1							1				1	1		1
Sonne Dysentery	3																			
TOTALS	955	61	538	316	8	16	11	5		104	85	102	163	87	60	141	67	118	28	68



# CASES OF INFECTIOUS DISEASE occurring in Spenborough Urban District classified according to Areas and Quarters, 1948

Disease	Cleckheaton, Hunsworth, Oakenshaw and Scholes				Liversedge, Roberttown, Hartshead and Norristhorpe				Gomersal and Birkenshaw				Spenborough			
	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4
Scarlet Fever	3	5	4	6	8	7	11	5	2	6	4	13	18	22	15	
Diphtheria ....	....	....	....	....	2	....	....	1	1	1	3	2	1	1	1	
Pneumonia ....	3	4	4	6	3	1	4	2	2	2	8	7	8	8	11	
Chicken Pox....	42	13	13	3	32	13	28	13	10	7	1	33	42	42	16	
Measles ....	5	229	11	28	12	120	22	10	4	68	9	21	417	34	47	
Whooping Cough	15	21	12	22	17	10	8	22	3	5	5	35	36	24	49	
Erysipelas ....	2	1	1	....	1	....	1	....	....	....	....	3	1	2	....	
Puerperal Pyrexia	....	....	....	....	1	....	....	....	....	....	....	1	....	....	....	
Sonne Dysentery	1	....	....	....	1	....	....	....	1	....	....	2	1	....	....	
	71	273	45	65	77	151	74	53	21	90	14	21	169	514	133	139

# NOTIFICATIONS OF INFECTIOUS DISEASE in Spenborough Urban District, 1925-1948

Year	Smallpox	Enteric Fever	Scarlet Fever	Diphtheria	Pneumonia	Cerebro Spinal Fever	Erysipelas	Malaria	Puerperal Fever	Puerperal Pyrexia	Ophthalmia Neonatorum	Chicken Pox	Respiratory Tuberculosis	Other Tuberculosis	Measles	Whooping Cough	Other Diseases	Totals
1925		2	58	3	86		13		5	3	2	80	34	13	911	79	2	218
1926		1	34	24	66		12		3	3	3	43	43	16	98	275	2	204
1927		4	45	9	75		13		1	3	3	27	19	19	440	99	4	203
1928	29	8	118	10	38		9		2	2	1	74	24	11	521	245	2	331
1929	82	13	116	28	108		15	1	1	1	4	233	26	14	195	102		447
1930	57	8	80	21	55		14		3	2	5	45	20	11	712	15	1	518
1931			83	28	101		6		2	4	1	291	22	13	63	272		302
1932		3	209	9	59		9		2	2	2	57	32	7		137	1	621
1933		1	111	59	60		6		1	1	1	81	18	8				335
1934			110	59	23		11		1	1	3	83	5	12				317
1935			119	71	34		8		1	1	6	108	16	4				340
1936			70	21	25		5		2	4	1	182	20	7				259
1937			65	21	37		12			1	3	315	29	11			1	341
1938			117	44	31		17			3	2	100	15	4			15	563
1939		3	51	25	20		8			6	5	81	4	9	911	79		256
1940		2	68	41	39		10			4	4	362	16	10	98	275		1273
1941		4	43	38	18		3			4	1	155	19	14	440	99	9	882
1942			180	27	30		12			2	1	267	23	13	521	245	15	979
1943			257	42	40		8	1		1	1	532	15	9	195	102	3	1438
1944			110	32	18		9					130	18	10	712	15	1	1026
1945			89	31	33		1		1		2	201	28	16	63	272	1	686
1946			43	29	27		4			1	3	215	23	17	408	137	9	870
1947			27	4	20		6					175	15	12	519	144	6	985
1948			68	5	34													

## DIPHTHERIA IMMUNISATION

A good response continued to be shown by parents to the appeal that their children should be immunised against diphtheria. Immunisation is undertaken at School Clinics, Child Welfare Clinics, special school sessions, and by general practitioners. The following table gives particulars of the number of children immunised during the year.

Period	Under 5	5—14	Re-Inforcing
Six months ending 30th June, 1948	292	253	67
Six months ending 31st December, 1948	248	21	46
Total	540	274	113

### TABLE SHOWING THE STATE OF DIPHTHERIA IMMUNISATION 1943-1948

Number of children immunised for the first time during each half year :—

		First half year	Second half year	Total
1943	...	462	155	617
1944	...	145	188	333
1945	...	207	218	425
1946	...	318	219	537
1947	...	150	390	540
1948	...	545	269	814

From the records which we have readily available it would appear that approximately 51 per cent. of children aged one to five years, and 77 per cent. of children aged five to fifteen years have been protected against diphtheria. Records for past years, however, are not readily available, and enquiry is proceeding to try to obtain a fuller picture of the state of immunisation of the children of the district. I confidently anticipate that when this information is available it will be found that a much higher percentage, particularly children of school age, have been so protected. Largely as a result of this measure diphtheria has become a rare disease, but there seems little doubt that should our efforts be relaxed the disease may once more reach epidemic proportions.



## TUBERCULOSIS

The Tuberculosis service in Spenborough is administered by the West Riding County Council with the weekly clinic which is held in the Council Offices, Knowler Hill, Liversedge. The following table gives particulars of the age groups of new cases notified, together with similar information regarding the five deaths which occurred from this disease during the year.

Age Periods	New Cases				Deaths			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M	F	M	F	M	F	M	F
0	—	—	—	—	—	—	—	—
1	—	—	—	1	—	—	—	—
5	—	1	1	1	—	1	—	—
10	—	—	2	1	—	—	—	—
15	—	—	—	—	—	—	—	—
20	1	3	—	—	—	1	—	—
25	4	1	1	—	1	—	—	—
35	—	1	2	2	—	—	—	—
45	2	—	1	—	—	1	—	—
55	1	—	—	—	1	—	—	—
64 and upwards	1	—	—	—	—	—	—	—
Totals	9	6	7	5	2	3	—	—

Two males Pulmonary Recovery.

One Female and one Male Non-pulmonary Recovery.

One Female Non-pulmonary Diagnosis Revised.

The following table gives the number of cases of Tuberculosis on the Register on 31st December, 1948.

	Pulmonary			Non-pulmonary			Total
Males	...	...	119	...	...	59	178
Females	...	...	72	...	...	49	121
			<u>191</u>			<u>108</u>	<u>299</u>

Fourteen notifications were received of admission of persons suffering from Tuberculosis to Sanatoria and eleven discharges. The following are the Institutions to which Tuberculosis patients were sent:—

	Admissions Form I.			Discharges Form II.		
Middleton-in-Wharfedale	...	...	6	...	...	5
Scotton Banks	...	...	6	...	...	3
Municipal Hospital, Wakefield	...	...	—	...	...	1
Oakwood Hall	...	...	1	...	...	1
Whitley Grange Sanatorium	...	...	1	...	...	1
			<u>14</u>			<u>11</u>



## MIDWIFERY

The West Riding County Council is the local supervising authority under the various Midwives Acts, and the work of the midwives is co-ordinated through the local Health Department. Five midwives were available to Spenborough residents until 30th June, 1948, when one resigned, and it was not until the middle of October that an appointment was made to fill this vacancy. 291 women were attended to in their homes. This is a large decrease from the very high figure of the previous year (477) and is to be accounted for by the falling birth-rate and the increase in confinements which took place in hospital.

Work done by midwives:

(a) Labours conducted							
(i) As midwife	...	...	...	...	...	...	206
(ii) As maternity nurse	...	...	...	...	...	...	85
Total							291
(b) Ante-natal visits	...	...	...	...	...	...	1286
(c) Post-natal visits	...	...	...	...	...	...	5675

The midwives are in possession of gas and air machines and, when recommended by a doctor, gas and air analgesia is available to patients during labour. During the year 81 women availed themselves of this service.

The hospitalisation of maternity cases takes place mainly in Staincliffe General Hospital and Crossley Maternity Home, and the following figures relate to the whole year:—

Staincliffe General Hospital	...	...	...	...	...	...	142
Crossley Maternity Home	...	...	...	...	...	...	131
Other Institutions	...	...	...	...	...	...	54

The services of a consultant obstetrician for domiciliary consultations were available.

## ANTE-NATAL CLINICS

Attendances at Ante-natal Clinics from 1st January, 1948, to 4th July, 1948:—

Elm Bank Clinic	...	...	...	...	...	...	...	...	469
Valley Road Clinic	...	...	...	...	...	...	...	...	531
Birkenshaw Clinic	...	...	...	...	...	...	...	...	270
Total during period									<u>1270</u>

Attendances at Ante-natal Clinics from 5th July, 1948, to 31st December, 1948:—

Elm Bank Clinic	...	...	...	...	...	...	...	...	396
Valley Road Clinic	...	...	...	...	...	...	...	...	405
Birkenshaw Clinic	...	...	...	...	...	...	...	...	170
Total during period									<u>971</u>
Total attendances during year									<u>2241</u>

Number of women attending for the first time from 1st January, 1948, to 4th July, 1948:—

Elm Bank Clinic	...	...	...	...	...	...	...	...	91
Valley Road Clinic	...	...	...	...	...	...	...	...	104
Birkenshaw Clinic	...	...	...	...	...	...	...	...	53
Total during period									<u>248</u>

Number of women attending for the first time from 5th July, 1948, to 31st December, 1948:—

Elm Bank Clinic	...	...	...	...	...	...	...	...	80
Valley Road Clinic	...	...	...	...	...	...	...	...	75
Birkenshaw Clinic	...	...	...	...	...	...	...	...	26
Total during period									<u>181</u>
Total number during year									<u>429</u>

The total number of sessions held was 139 and the average attendance at each clinic was as follows:—

Elm Bank	...	...	...	...	...	...	...	...	16
Valley Road	...	...	...	...	...	...	...	...	20
Birkenshaw	...	...	...	...	...	...	...	...	12

## INFANT WELFARE CENTRES

The number of attendances at the Council's Infant Welfare Centres for the whole year was 9686, showing a further slight increase over last year's record figure of 9630. The following table shows attendances, etc., at the various clinics, and is so set out to show all details before and after the Appointed Day.

### ATTENDANCES AT INFANT WELFARE CENTRES

Centre		Attendances		Medical Consultations	Total Attendances	No. of Sessions	Average Attend- dance per Session
		Under 1 year	1-5 years				
Elm Bank	(a) ...	1553	265	280	1818	26	69
	(b) ...	1001	284	174	1285	25	51
Birkenshaw	(a) ...	887	197	215	1084	26	42
	(b) ...	874	267	158	1141	23	49
Valley Road	(a) ...	1183	176	241	1359	26	52
	(b) ...	1021	146	192	1167	23	50
Scholes	(a) ...	147	52	43	199	6	33
	(b) ...	76	78	29	154	6	26
Roberttown	(a) ...	205	41	68	246	6	41
	(b) ...	140	83	47	223	6	37
Gomersal	(a) ...	401	107	78	508	13.	39
	(b) ...	384	118	61	502	12	44
Totals ...		7872	1814	1586	9686	198	

(a) Relates to the period 1st January, 1948, to 4th July, 1948.

(b) Relates to the period 5th July, 1948 to 31st December, 1948.

Number of children under five years of age who first attended at the centres during the year and who on the date of their first attendance were:—

(a) Under one year of age—538.

(b) Over one year of age—77.

Number of children under five years of age who attended at the centres during the year, and who at the end of the year were:—

(a) Under one year of age—451.

(b) Over one year of age—812.



Particulars follow of the total attendances of all cases and also the number of new cases which attended in each of the past five years at all Infant Welfare Centres.

Year	Total attendance of all children	Total children attending for the for the first time
1944	7386	
1944	7801	599
1946	7997	679
1947	9630	813
1948	9686	615

At these clinics medical consultations are available. Babies are weighed and the nurses in attendance give advice and demonstrations on management to the mothers. By arrangements with the Ministry of Food, the Welfare Foods can be bought, and, in addition, a wide range of infant foods are sold.

## HEALTH VISITORS

The following figures show the extent of domiciliary visiting achieved by the Health Visitors during the past years. Further staff is required if a satisfactory level of domiciliary visiting is to be obtained, but the figures show that the staff available in this area have done all that could be expected to make the domiciliary visiting the focal point of this work. The tasks and duties which are being piled on the modern Health Visitor make it at once apparent that she is the general practitioner of the preventive medical services, and perhaps the most valuable of our socio-medical field workers.

Number of visits paid during the year by all Health Visitors:—

- (a) To expectant mothers:—
  - (i) First visits—111.
  - (ii) Total visits—188.
- (b) To children under one year of age:—
  - (i) First visits 646.
  - (ii) Total visits—2401.
- (c) To children between the ages of one and five years:—
  - (i) Total visits 2644.

## PROBLEM FAMILIES

During the year there were 18 problem families under constant supervision, and the Health Visitors made a total of 116 home visits to these families. No compulsory removals of children from their parents because of cruelty or neglect took place during the year. The aid of the inspector of the N.S.P.C.C. was sought on several occasions and all cases were fully discussed with him with a view to achieving co-ordination of work and so that no avenue of approach to these cases might be neglected. School teachers have also co-operated most helpfully.

## HOME NURSING SERVICE

Prior to 5th July, 1948, there were in Spenborough four District Nursing Associations which employed five Nurses, all of whom were "Queen's" Nurses. From the Appointed Day under the National Health Service Act, 1946, the West Riding County Council took over the functions of these Associations for all purposes, all the nurses being transferred.

The following information relates to the work undertaken by the district Nurses since 5th July, 1948, up to the end of the year.

(a) Number of cases being attended on 5th July, 1948	...	...	...	65
(b) Number of new cases	...	...	...	52
(c) Number of visits paid between 5th July and end of year	...	...	6741	

## HOME HELP SCHEME

The number of Home Helps employed at the beginning of the year was two, and this was the number employed on 5th July, 1948. By the end of the year this number had risen to nine, and the demand for this service was greatly increasing. The following figures show the numbers and types of cases provided with Home Help during the year.

Number of cases provided with Home Help:—

(a) Prior to 5th July, 1948—	(i) confinement cases	...	...	...	6
	(ii) others	...	...	...	2
(b) After 5th July, 1948 —	(i) confinement cases	...	...	...	14
	(ii) others	...	...	...	16
					—
					Total 38
					—

SCHOOL HEALTH SERVICE

Total number of children examined at Routine Medical Inspections :—

Entrants ... ..	791
Intermediates ... ..	1048
Leavers ... ..	302
	<hr/>
	2141

Total number of children who have been re-examined for follow-up of defects—284.

Standards of physical development classified into age groups.

Age Group	Nutrition A	Nutrition B	Nutrition C
Entrants	377	386	28
Intermediates	358	654	36
Leavers	126	175	1
Totals	861	1215	65

Percentages

Age Group	Nutrition A	Nutrition B	Nutrition C
Entrants	47.7	48.8	3.5
Intermediates	34.2	62.4	3.4
Leavers	41.7	57.9	0.4
Totals	40.2	56.7	3.1

During the year 160 free issues of dietary supplements in the form of iron tonics were made to school children of poor physical development where recommended by the School Medical Officer.

The following table shows the number and types of defects discovered at the Routine School Medical Inspections.

DEFECTS TABLE

Defects	Recommended for treatment	Recommended for observation	Total
Skin	4	3	7
Ears—Hearing	—	1	1
Oitis Media	—	6	6
Other	3	6	9
Nose and Throat	122	264	386
Speech	3	7	10
Cervical Glands	3	168	171
Heart and Circulation	3	56	59
Lungs	2	57	59
Orthopædic	7	3	10
Other defects	13	52	65
Total	160	623	783



## CHIROPODY

The Chiropodist held his first session at Elm Bank Clinic on 9th September, 1948, and a total of 33 half-day sessions were held during the remainder of the year. A total of 119 cases were seen by the Chiropodist, and at the year end there were still 27 cases on the waiting list to be seen. The 119 cases seen made 434 attendances and the following table gives the types and numbers of conditions treated.

Defect	Number	Defect	Number
Verrucæ ... .. 14		Hammer Toe ... .. 15	
Overlapping Toe ... .. 22		Heloma Durum ... .. 26	
Heloma Molle ... .. 5		Nail conditions ... .. 11	
Weak or flat foot ... .. 6		Hallux Valgus ... .. 14	
Hyperidrosis ... .. 2		Pes Cavus ... .. 4	
Bursæ ... .. 7		Septic conditions ... .. 3	
Chilblain ... .. 2		Callus ... .. 12	
Osteitis ... .. 1			

## ORTHOPÆDIC TREATMENT

A special Orthopædic Clinic was held once a month at Staincliffe General Hospital, when the Orthopædic Surgeon was in attendance. The following table gives the number and types of cases referred to during 1948.

Number of children referred to Orthopædic Specialist:—

(a) From routine school medical inspections ... .. 7	
(b) From other inspections ... .. 17	
Number of children requiring treatment ... .. 17	

The following defects were treated:—

Defect	No. of children treated
Flat feet ... .. 4	
Hallux Valgus ... .. 4	
Inversion of feet ... .. 2	
Infantile paralysis ... .. 1	
Hammer toe ... .. 1	
Severe tibial bow legs ... .. 1	
Pes cavus ... .. 1	
Congenital deformity of right leg ... .. 1	
Knock knee ... .. 1	
Pigeon chest ... .. 1	

## PHYSIOTHERAPY

The Physiotherapist held her first session at Elm Bank Clinic on the 10th September, 1948, and a total of 34 half day sessions were held during the remainder of the year. A total of 52 children were referred for treatment and the following table shows the types and number of defects referred:—

Defect	Number
Asthma ... ..	9
Bronchitis ... ..	5
Other chest defects ... ..	7
Posture ... ..	2
Scoliosis ... ..	2
Kyphosis ... ..	1
Knock knee ... ..	2
Flat foot ... ..	19
Bronchiectasis ... ..	1
Obesity ... ..	1
Polyarthrititis ... ..	1
Debility ... ..	1
Walking exercises after operation ... ..	1
Total	52
Total number of attendances ... ..	232
Total number of treatments ... ..	278
Number discharged ... ..	19
Number on waiting list ... ..	8

## EYES

The Eye Clinic was held one day each week at Elm Bank, when the Ophthalmologist was in attendance. The following statistics give details of cases referred:—

Number of children referred to specialist for defective vision:—

(a) From routine inspections ... ..	85
(b) from special inspections and the School nurses ... ..	289
Number examined by Ophthalmologist ... ..	242
Number of sessions held during the year ... ..	36
Number for whom spectacles were prescribed ... ..	191
Number on waiting list to be seen ... ..	132
Number awaiting re-examination ... ..	106
Number referred to Ophthalmologist for treatment of squint ... ..	4
Number under observation for squint ... ..	6

## CLEANLINESS INSPECTIONS

Three routine cleanliness inspections were carried out at each school by the school nurses and a total of 10,953 inspections and re-inspections were carried out. In 1,002 instances the condition was reported to be unsatisfactory. Thus the presence of nits was recorded in 910 cases, pediculi in 41, dirty heads in 17, and dirty bodies in 34. The condition of several children was unsatisfactory on more than one occasion. It should be pointed out that in the majority of cases the degree of infestation is extremely light.

The remedial procedure adopted on the discovery of these defects is to notify the parents informally in the first instance, visiting, if necessary, to give advice on the methods of dealing with infestation. If cure is not effected the nurse visits the home and interviews the parents and finally, if it is evident that insufficient care is being exercised, the Statutory Notice under the Education Act, 1944, is sent requiring the child to be cleansed to the satisfaction of the Medical Officer or of the person appointed by him for that purpose within 48 hours.

## SPECIAL EXAMINATIONS

In accordance with the requirements of the Education Act, 1944, a number of children have been referred by the Education Authority which have necessitated the arrangement of special examinations. Twenty-seven such children were examined during the year out of which eleven were physically handicapped, seven maladjusted and nine educationally sub-normal. Six children were referred to the Child Guidance Clinic for investigation or treatment.

## MINOR AILMENTS

Minor ailments are treated by the nurses both at the clinics and in the schools. The following table gives details of such treatments during 1948.

Minor Ailment	No dealt with at		Total
	Clinics	Schools	
Skin—			
Ringworm—			
Body ... ..		2	2
Scabies ... ..	6	22	28
Impetigo ... ..	17	54	71
Other skin diseases ...	32	92	124
Eye Disease ... ..	12	79	91
(External and other, but excluding squint, errors of refraction and cases admitted to hospital).			
Ear Defects ... ..	3	46	49
Miscellaneous ... ..	84	2184	2268
(e.g.: minor injuries, bruises, sores, chilblains, etc.).			
Total	154	2479	2633
Total number of attendances at Authority's minor ailment clinics .. ...	270	2873	3143



The following section of the report has been supplied to me by the Chief Sanitary Inspector concerning the sanitary circumstances of the area and of the work of the Sanitary Inspectors in accordance with the Sanitary Officers' (Outside London) Regulations, 1935.

### FACTORIES ACT, 1937

#### Factories (Mechanical and Non-Mechanical)

There are 341 factories in the area. Of these 275 are factories with mechanical power and 66 without. 226 inspections and 82 revisits were made of these premises and the following improvements were carried out:—

#### Improvements

Artificial lighting provided to conveniences	...	...	...	...	...	...	37
Dirty walls of W.C.s cleansed	...	...	...	...	...	...	75
Insanitary conveniences replaced	...	...	...	...	...	...	3
W.C. apparatus repaired	...	...	...	...	...	...	41
Lack of intervening ventilated space to W.C. compartments	...	...	...	...	...	...	3
Insufficient ventilation to W.C. compartments	...	...	...	...	...	...	29
Separation of sexes	...	...	...	...	...	...	9
Fastenings provided to doors of W.C. compartments	...	...	...	...	...	...	41
Provision of thermometers in workrooms	...	...	...	...	...	...	1

#### Outworkers

Eighteen persons in the district were notified to the Department during the year. These were all engaged in the making of wearing apparel for firms outside the area. The premises were visited and all were found satisfactory.

No difficulties were encountered in the administration of the Factories Act. It was not necessary to institute proceedings during the year, as all informal notices were complied with.

### INSPECTION AND SUPERVISION OF FOOD

#### A—PRODUCTION AND SALE OF MILK

##### (1) Registration of Producers and Retailers

Registered Cowkeepers	...	...	...	...	...	...	89
Registered Producers (Retail)	...	...	...	...	...	...	64
Registered Producers (Wholesale)	...	...	...	...	...	...	25
Registered Retailers (Non-Producers residing in the area)	...	...	...	...	...	...	22
Registered Retailers from other areas	...	...	...	...	...	...	10

##### (2) Milk (Special Designations) Regulations, 1936 to 1946

##### No. of Licences issued by the County Council

To produce Tuberculin Tested Milk	...	...	...	...	...	...	8
To produce Accredited Milk	...	...	...	...	...	...	18

##### No. of Licences issued by the Council

Principal Licences to sell Pasteurised Milk	...	...	...	...	...	9
Principal Licences to sell Tuberculin Tested Milk	...	...	...	...	...	11
Supplementary Licences to sell Pasteurised Milk	...	...	...	...	...	8
Supplementary Licences to sell Tuberculin Tested Milk	...	...	...	...	...	7

Two hundred and fifty-nine inspections were made of dairies and cowsheds. Some cowsheds in the area are still not up to the required standard. With the increase in supplies of certain building materials it should be possible, in the near future, to effect the necessary improvements. It should be pointed out however, that, although good buildings and equipment are important, these are no use unless the farmer practises clean methods of milk production.

### (3) Milk Sampling

The following tables show the number of samples taken by the Department and by the West Riding County Council.

#### Spensorough Health Department

	Satisfactory	Unsatisfactory	Total
Accredited ... ..	1	1	2
Pasteurised ... ..	7	—	7
Tuberculin Tested ... ..	1	1	2
Ordinary ... ..	137	41	178
	<hr/> 146	<hr/> 43	<hr/> 189

#### School Milk

	Satisfactory	Unsatisfactory	Total
Accredited ... ..	10	1	11
Pasteurised ... ..	28	3	31
	<hr/> 38	<hr/> 4	<hr/> 42

#### Samples taken by the West Riding County Council as the Licensing Authority

##### Milk (Special Designations) Regulations, 1936 to 1946

	Satisfactory	Unsatisfactory	Total
Tuberculin Tested ... ..	11	—	11
Accredited ... ..	21	2	23
	<hr/> 32	<hr/> 2	<hr/> 34

The number of unsatisfactory milk samples indicates that methods of milk production can be improved. Producers are notified of the results of all samples taken. In the case of an unsatisfactory sample, the farm is visited and methods of production are closely examined. Advice is given as to the probable cause and repeat samples taken. It was not necessary to take statutory action against any producer. As a general rule, milk producers are fully aware of their responsibilities to the public.

### (4) Examination for Bacillus Tuberculosis

During the year 20 samples of milk were submitted by the Department for examination for tuberculosis. Nineteen were found negative and one positive. As a result of the positive sample, one cow was slaughtered under the Tuberculosis Order. A repeat sample was taken at the farm and the result was negative.



Two cows from dairy herds in the area were slaughtered under the Tuberculosis Order as a result of routine veterinary examination. Two cows from herds outside the area were slaughtered at Spenborough Abattoir under the Tuberculosis Order as a result of veterinary examinations.

The danger to the public in the sale of milk infected with tuberculosis has always been apparent, but, unfortunately, there has been insufficient legislation to deal effectively with the problem. At last, however, as a result of the new Milk (Special Designations) Bill certain safeguards will be given to the public when it becomes law. The long-term policy is the eradication of tuberculosis in herds on an area basis, and this will take a considerable time. In the meantime, according to the terms of the Bill, only approved kinds of milk may be sold, namely Tuberculin Tested (Certified) Milk, Tuberculin Tested Milk, Accredited Milk from a single herd, Pasteurised Milk and Sterilised Milk. By 1954 it is anticipated that only the sale of Pasteurised and Tuberculin Tested Milk will be allowed.

### B.—MEAT INSPECTION

The following table shows the number of animals slaughtered at the Public Abattoir, Liversedge. One Inspector is employed full-time at the Abattoir to ensure 100 per cent inspection.

Month	Beasts		Sheep	Pigs	Calves	Total
January	...	175	1186	46	237	1644
February	...	164	933	28	202	1327
March	...	203	871	29	312	1415
April	...	188	294	34	180	696
May	...	174	165	20	136	495
June	...	97	489	15	163	764
July	...	181	500	12	202	895
August	...	369	757	8	300	1434
September	...	576	1196	15	260	2047
October	...	620	2081	33	291	3025
November	...	567	2207	74	292	3140
December	...	229	940	185	142	1496
		3543	11619	499	2717	18378

#### Carcases Inspected and Condemned

	Cattle (incl. Cows)		Calves	Sheep and Lambs	Pigs
Number killed	...	3543	2717	11619	499
Number inspected	...	3543	2717	11619	499

<b>All Diseases except T.B.</b>	Cattle (excl. Cows)		Cows	Calves	Sheep and Lambs	Pigs
Whole Carcases condemned	—		7	5	9	13

<b>Tuberculosis only</b>						
Whole Carcases condemned	16	24	4	—	—	—

Total weight of meat condemned during the year was:—					
	Tons	Cwts.	Qrs.	lbs.	
Tuberculosis	24	2	3	25	
Other Diseases	14	13	0	18	
	38	16	0	15	



The following was also condemned :—

Frozen Beef	...	...	...	...	19 cwts.	2 qrs.	6 lbs.
Frozen Lamb	...	...	...	...			13 lbs.

During the year the Beast Lairage was pulled down and replaced by a large Nissen type hut. It is hoped that the alterations to the pens will be completed at an early date.

### C—INSPECTION OF OTHER FOODS

The following unsound food was inspected and condemned during the year :—

Canned Food	...	...	...	...	...	...	...	...	...	lbs.
Corned Beef and Pork (Abattoir)	...	...	...	...	...	...	...	...	...	859
Canned Fish	...	...	...	...	...	...	...	...	...	1296
Pudding Mixture	...	...	...	...	...	...	...	...	...	154
Jam	...	...	...	...	...	...	...	...	...	4½
Pickles	...	...	...	...	...	...	...	...	...	3
Cereals	...	...	...	...	...	...	...	...	...	7
Butter	...	...	...	...	...	...	...	...	...	8
Dried Eggs	...	...	...	...	...	...	...	...	...	20½
Eggs	...	...	...	...	...	...	...	...	...	1
										87½
										<hr/> 2440½ <hr/>

1 ton 1 cwt. 3 qrs. 4½ lbs.

### D.—INSPECTION OF FOOD PREMISES

The following table shows the number of food preparing premises registered in the area.

Bakehouses	...	...	...	...	...	...	...	...	...	18
Fish Frying	...	...	...	...	...	...	...	...	...	46
Ice-cream Manufacturing	...	...	...	...	...	...	...	...	...	8
Premises used for the preparation or manufacture of sausages, potted, pressed, pickled or preserved food intended for sale	...	...	...	...	...	...	...	...	...	27

During the year 790 visits were made to premises where food is prepared for sale or sold. Informal notices were served for the following defects. These were complied with.

Defective floor	...	...	...	...	...	...	...	...	...	1
Cleansing of walls and ceilings	...	...	...	...	...	...	...	...	...	19
Provision of new ceilings	...	...	...	...	...	...	...	...	...	5
Plastering of walls and ceilings	...	...	...	...	...	...	...	...	...	11
Provision of means of ventilation	...	...	...	...	...	...	...	...	...	1
Provision of hot water	...	...	...	...	...	...	...	...	...	2
Defective water closets	...	...	...	...	...	...	...	...	...	2

### E—WATER SUPPLY

The water supply in the area is satisfactory both in quantity and quality.

Number of dwellinghouses supplied direct from public water mains	11998
Number of population supplied direct from public water mains	36580
Number of dwellinghouses supplied from public water mains by means of stand pipes	Nil
Number of population supplied from public water mains by means of stand pipes	Nil

## Wells

Four samples of water were submitted for bacteriological examination and were satisfactory.

Four samples of water were submitted for chemical analysis and were found to be of good organic quality.

## Results

Parts per 100,000	...	...	1	2	3	4
Total Solids	...	...	7.0	8.0	6.0	8.0
Chloride	...	...	1.1	1.1	1.1	1.1
Nitrite	...	...	Nil	Nil	Nil	Nil
Nitrate	...	...	Nil	Trace	Nil	Nil
Free Ammonia	...	...	.002	.002	.004	.002
Albuminoid Ammonia	...	...	.002	.002	.002	.002
Poisonous Metals	...	...	Nil	Nil	Nil	Nil
Total Hardness	...	...	3.5	4.4	4.4	4.2
pH	...	...	8.5	8.0	7.8	7.0

These waters are of good organic quality.

RICHARDSON & JAFFE.

F. W. M. JAFFE.

## SANITARY INSPECTION OF DISTRICT

Infectious Diseases	...	...	...	...	...	...	...	...	183
Dairies and Cowsheds	...	...	...	...	...	...	...	...	259
Milk and Water Sampling	...	...	...	...	...	...	...	...	218
Ice Cream Sampling	...	...	...	...	...	...	...	...	5
Bakehouses	...	...	...	...	...	...	...	...	37
Fish Frying Premises	...	...	...	...	...	...	...	...	164
Food Preparing Premises and Cafes	...	...	...	...	...	...	...	...	104
Butchers' Shops	...	...	...	...	...	...	...	...	95
Food Shops	...	...	...	...	...	...	...	...	302
Food Inspections	...	...	...	...	...	...	...	...	83
Public Abattoir	...	...	...	...	...	...	...	...	347
Market	...	...	...	...	...	...	...	...	142
Shops Acts	...	...	...	...	...	...	...	...	247
Housing Act	...	...	...	...	...	...	...	...	353
Housing Act re-inspections	...	...	...	...	...	...	...	...	644
Overcrowding and Points Priority	...	...	...	...	...	...	...	...	646
Public Health Act	...	...	...	...	...	...	...	...	987
Public Health Act re-inspections	...	...	...	...	...	...	...	...	983
Verminious or Unclean Premises	...	...	...	...	...	...	...	...	250
Drainage	...	...	...	...	...	...	...	...	426
Ashpit Conversions	...	...	...	...	...	...	...	...	368
Rodent Control	...	...	...	...	...	...	...	...	207
Offensive Trades	...	...	...	...	...	...	...	...	4
Public Cleansing	...	...	...	...	...	...	...	...	507
Factories	...	...	...	...	...	...	...	...	308
Smoke Observations	...	...	...	...	...	...	...	...	78
Interviews	...	...	...	...	...	...	...	...	549
Miscellaneous	...	...	...	...	...	...	...	...	251

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## SUMMARY OF DEFECTS REMEDIED DURING 1948

### Housing Act, 1936, and Public Health Act, 1936

New dustbins provided including replacement of ashpits	...	...	...	...	...	...	...	1244
Ashpits abolished	...	...	...	...	...	...	...	263
Defective wallplaster repaired	...	...	...	...	...	...	...	46
Damp walls remedied	...	...	...	...	...	...	...	50
Rain water pipes and gutters repaired	...	...	...	...	...	...	...	95
Drains cleansed and repaired	...	...	...	...	...	...	...	36
W.C. apparatus repaired	...	...	...	...	...	...	...	97
Ranges and Flues repaired	...	...	...	...	...	...	...	34
Roofs made weatherproof	...	...	...	...	...	...	...	82
Doors and windows repaired	...	...	...	...	...	...	...	74
Ceilings repaired	...	...	...	...	...	...	...	31
Floors and stairs repaired	...	...	...	...	...	...	...	16
Sinks and waste pipes repaired or replaced	...	...	...	...	...	...	...	41
Cleansing of premises	...	...	...	...	...	...	...	5
Chimney stacks repaired	...	...	...	...	...	...	...	17
Water supply improved	...	...	...	...	...	...	...	15
Yards and footpaths repaired	...	...	...	...	...	...	...	4
Cellars repaired	...	...	...	...	...	...	...	4
Dangerous walls	...	...	...	...	...	...	...	3
Provision of ventilation	...	...	...	...	...	...	...	1
Provision of hot water	...	...	...	...	...	...	...	1
Cleansing of poultry runs	...	...	...	...	...	...	...	2
Accumulations of refuse	...	...	...	...	...	...	...	3
Emmision of effluvia	...	...	...	...	...	...	...	1
								<hr/> 1694 <hr/>



## HOUSING

### Number of New Houses erected during the year

(a) Total, including numbers given separately under (b)	...	...	218
1. By the Local Authority	...	...	212
2. By other Local Authorities	...	...	Nil
3. By other bodies or persons	...	...	6
(b) With State assistance under the Housing Acts.			
1. By the Local Authority	...	...	212
2. By other bodies or persons	...	...	Nil

### 1. Inspection of Dwelling Houses during the year

(1) (a) Total number of dwellinghouses inspected for housing defects (under Public Health or Housing Acts)	...	...	1340
(b) Number of inspections made for the purpose	...	...	2967
(2) (a) Number of dwellinghouses (included under sub-head (1) above) which were inspected and recorded under the Housing Consolidated Regulations 1925 and 1932	...	...	353
(b) Number of Inspections made for the purpose	...	...	997
(3) Number of dwellinghouses found to be in state so dangerous or injurious to health as to be unfit for human habitation	...	...	172
(4) Number of dwellinghouses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation	...	...	454

### 2. Remedy of Defects during the year without Service of Formal Notices

Number of defective dwellinghouses rendered fit in consequence of informal action by the Local Authority or their Officers	...	...	570
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### 3. Action under Statutory Powers during the year

#### (a) Proceedings under Sections 9, 10 and 16 of the Housing Act, 1936.

(1) Number of dwellinghouses in respect of which notices were served requiring repairs	...	...	39
(2) Number of dwellinghouses which were rendered fit after service of formal notices :—			
(a) By Owners	...	...	27
(b) By Local Authority in default of Owners	...	...	12

#### (b) Proceedings under Public Health Acts.

(1) Number of dwellinghouses in respect of which notices were served requiring defects to be remedied	...	...	79
(2) Number of dwellinghouses in which defects were remedied after service of formal notices :—			
(a) By Owners	...	...	44
(b) By Local Authority in default of Owners	...	...	30

**(c) Proceedings under Sections 11 and 13 of the Housing Act, 1936.**

(1)	Number of dwellinghouses in respect of which Demolition Orders were made	...	...	...	...	...	...	...	...	1
(2)	Number of houses demolished in pursuance of Demolition Orders	...	...	...	...	...	...	...	...	—

The Council also accepted undertakings from owners in fourteen cases stating that they agreed not to re-let houses for human habitation.

**(d) Proceedings under Section 12 of the Housing Act, 1936.**

(1)	Number of separate tenements or underground rooms in respect of which Closing Orders were made	...	...	...	...	—
(2)	Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit	...	...	...	...	—

Many problems have faced the Department in this branch of the work during the year. The standard of housing is low and a great amount of slum clearance work will be necessary. It is estimated that there are 1200 houses in the area requiring demolition as a first instalment in a Clearance Area Programme.

Once again difficulties have been experienced in the repair of houses. Complaints are continually being received from tenants occupying houses which are unfit for human habitation and in normal times these would be demolished. It is obvious that first-aid repairs are necessary but the position is aggravated by the low rents paid by a large number of tenants in this district. Although the cost of repairs has been increased, no corresponding rent increases have been allowed. It is essential that something be done to alter this state of affairs. It is estimated that 60 per cent. of the 12,000 houses in the area have a rateable value of £10 and less. Rents of these properties are therefore low and owners are unable to keep them in a proper state of repair.

No reliable figures are available with regard to the extent of overcrowding in the area. During the year, the Council re-housed 101 families who were living in overcrowded conditions. The worst cases of overcrowding have now been dealt with. Besides overcrowded cases still to be re-housed there must be a large number of houses where sexual overcrowding occurs. This is due to the number of small houses consisting of one living room and one bedroom, or one living room and two bedrooms, of which one is usually little more than a boxroom. In my opinion it is essential that a National Overcrowding Survey be carried out as soon as possible in order to ascertain the degree of overcrowding in the country and the standard by which such overcrowding should be judged should be a bedroom standard and not one based on the total number of habitable rooms in a dwelling.



## PRIVIES

The following table summarizes the extent of this type of convenience throughout the area:—

	Number	Est. No. considered inconvertible
Hartshead ... ..	72	52
Norristhorpe ... ..	45	17
Roberttown ... ..	69	14
Hightown ... ..	70	12
Scholes and Hartshead Moor ... ..	32	11
Cleckheaton ... ..	39	10
Oakenshaw and Wyke ... ..	13	9
East Bierley and Birkenshaw ... ..	30	11
Gomersal ... ..	72	23
Millbridge, Littleton and Frost Hill ... ..	84	6
	<hr/> 526	<hr/> 165
Convertible: 361		

## ASHPITS ABOLITION SCHEME

During the year, the above Scheme was completed and the final figures are as follows:—

Notices served	Bins supplied	Ashpits abolished
783	2524	640

## VERMINOUS PREMISES

During the year no Council houses were found infested with vermin. Nineteen other houses in the district were found to be verminous and all were disinfected with H.C.N. or D.D.T. In addition the household effects of 34 houses were fumigated with H.C.N. before removal to Council houses.

A total of 250 visits were made to verminous or unclean premises.

## RODENT CONTROL

### Rats and Mice (Destruction) Act, 1919 Infestation Order, 1943

During the year 28 infestations were dealt with. The necessary poisoning treatments as laid down by the Ministry of Agriculture and Fisheries (Rodent Division) were carried out.

Two hundred and seven visits and re-inspections were made.

## SHOPS ACTS

The number of shops in the area is 200. A total of 247 inspections was made. Two contraventions of the Act were found and both were remedied after informal action.

The following work was done:—

Suitable sanitary accommodation provided.

## OFFENSIVE TRADES

There are two offensive trades registered in the district.

One Tripe Boiler. One Soap Boiler.

Four inspections were made and no nuisance found.



SMOKE ABATEMENT

Seventy-eight observations of 30 minutes duration were taken during the year. Of these 17 were unsatisfactory.

Contraventions over permitted three minutes black smoke in 30 minutes.

Up to 1 min.	1 to 2 mins.	2 to 3 mins.	3 to 4 mins.	4 to 5 min.
5	2	1	6	1
More than 5 mins.				
2				

One factory gave considerable trouble during the year and many complaints were received concerning it. Observations were taken at varying times and in varying climatic conditions. The occupier was interviewed with the result that extensive alterations to the plant were carried out. Particular attention was paid to those premises where black smoke emission was known to be excessive. There is no doubt that much of the nuisance is due to faulty methods of stoking and not to the fuel which is often blamed by those responsible.

During the year the Executive Council of the National Smoke Abatement Society requested Local Authorities to co-operate in making a National Survey of the Sources and Incidence of Atmospheric Pollution. The Health Department made a survey and forwarded the results to the Society. As part of the survey a questionnaire was circulated to 148 firms in the district and 124 replied. The following information was obtained: 1—Type of Boilers. 2—Use . 3—Fuel. 4—Stoking appliances. 5—Draughts. 6—Chimney.

SALVAGE

The following salvage was collected from January 1st to December 31st, 1948:—

Type	Weight				Value		
	T.	C.	Q.	L.	£	s.	d.
Paper ... ..	291	17	2	—	1860	7	4
Scrap Metal ... ..	14	12	—	24	65	0	11
Bottles and Jars ... ..	27	7	1	—	134	12	0
Rags ... ..	9	11	2	—	87	10	7
Bones ... ..	2	1	1	—	11	16	11
Kitchen Waste ... ..	217	—	1	—	325	10	8
Miscellaneous ... ..	4	8	1	16	32	3	10
Total ... ..	566	18	1	12	2517	2	3

## STAFF OF THE HEALTH DEPARTMENT

### Medical Staff

WILLIAM M. DOUGLAS, M.B., Ch.B., D.P.H.

Medical Officer of Health.

Divisional Medical Officer.

### Sanitary Inspector's Staff

J. F. TEMPLEMAN, A.R.San.I., M.S.I.A., Certificates of the Royal Sanitary Institute for the Inspection of Meat and Other Foods. Chief Sanitary Inspector. Cleansing Officer. Market Superintendent.

F. E. DAWSON, M.R.San.I., M.S.I.A., Certificate of the Royal Sanitary Institute for the Inspection of Meat and Other Foods. Deputy Chief Sanitary Inspector.

P. R. E. FOULDS, Certificate of the Royal Sanitary Institute and the Sanitary Inspectors Examination Joint Board. Additional Sanitary Inspector (Resumed duties after Military Service, 1st August, 1948).

G. M. GILMORE, A.R.San. I., M.S.I.A., Additional Sanitary Inspector.

J. G. SCOTT, A.R.San.I., M.S.I.A. Certificate of the Royal Sanitary Institute for the Inspection of Meat and Other Foods. Additional Sanitary Inspector.

W. F. THORNTON, Clerk. Sanitary Inspector's Section.

### Divisional Public Health Staff (Division 17, comprising Spenborough and Mirfield Urban Districts).

#### Medical Staff

SARAH KELLY, L.R.C.P., L.R.C.S., Assistant County Medical Officer (commenced March, 1948).

ELEANOR M. WHITEHEAD, M.B., Ch.B., Assistant County Medical Officer (commenced July, 1948).

#### Clerical Staff

MARSHALL, P., Chief Clerk (commenced January, 1948).

FURNESS, M. R.

HODGSON, D. M. (Commenced March, 1948.)

HOLDSWORTH, L. (commenced May, 1948.)

POPPLEWELL, M. (Commenced February, 1948.)

THEWLIS, V.

WILSON, F. M. (left March, 1948).

### **Health Visitors (Part time School Nurses)**

Miss D. DAY, S.R.N., S.C.M., H.V. Cert. of R.S.I. Senior Health Visitor.

Miss D. SCHOFIELD, S.R.N., S.C.M., H.V. Cert. of R.S.I.

Mrs. M. E. DICKENS, S.R.N., S.C.M.

Mrs. M. RAYNER, S.R.N., S.C.M., H.V., Cert. of R.S.I.

Miss B. FRASER, S.R.N., S.C.M., H.V. Cert. of R.S.I. (Resigned November, 1948).

Miss E. G. MITCHELL, S.R.N., S.C.M., H.V. Cert. of R.S.I. (Commenced April, 1948).

### **Assistant Health Visitors (Temp. School and Clinic Nurses)**

Mrs. G. MARSHALL, S.R.N. (Commenced July, 1948.)

Miss A. B. DOBSON, S.R.N., S.C.M. (Commenced October, 1948.)

Miss D. V STAMPER, S.R.N., S.C.M. (Commenced November, 1948.)

### **Midwives**

Miss E. J. POTTS, C.M.B.

Miss L. BENFELL, S.R.N., C.M.B. (Resigned June, 1948.)

Mrs. D. M. GOMERSALL, S.R.N., C.M.B.

Mrs. E. JOHNSON, C.M.B.

Mrs. B. RYDER, C.M.B.

Mrs. G. D. WATSON, S.C.M. (Commenced October, 1948.)

### **District Nurse Midwives**

Miss M. LAYCOCK, S.R.N., C.M.B. (From 5th July, 1948.)

Miss B. D. SHARP, S.R.N., C.M.B. (From 5th July, 1948.)

### **District Nurses**

Miss F. E. GAMBLE, S.R.N., Queen's Nurse. (From 5th July, 1948.)

Miss F. METCALFE, S.R.N., C.M.B., Queen's Nurse. (From 5th July, 1948.)

Miss E. BIRD, S.R.N., C.M.B., Queen's Nurse. (From 5th July, 1948.)

Miss E. PHILLIPS, S.R.N., Queen's Nurse. (From 5th July, 1948.)

Mrs. E. SAYLES, S.R.N., C.M.B., Queen's Nurse. (From 6th December, 1948.)

### **Moorend Day Nursery**

Mrs. W. M. BROOKE, S.R.N., Matron.

Miss K. ARMITAGE, S.E.A.N., Deputy Matron.

Miss M. A. LAWTON, Warden.

Miss L. RUSHWORTH, Nursery Assistant.

Mrs. C. DIAPER, Enrolled Assistant Nurse.

Miss A. M. LONGDEN, Nursery Assistant.

### **Part Time Staff**

Mr. B. D. VAINES, M.Ch.S., Chiropodist.

Miss D. RENDER, M.C.S.P., Physiotherapist.

Mr. L. WITTELS, M.D. (Vienna), D.O., Consultant Ophthalmologist.







